FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee			ittee	Office Use Only		
NAME OF COMMITTEE (in full)	USE FEC MAIL OR TYPE OR P		ample:If typing, type er the lines			
BOB BRADY FOR COM	NGRESS	1 1 1 1 1 1 1		<u> </u>		
ADDRESS (number and stre	et) 2000 Marke	t Street Suite 500				
Check if different						
than previously reported. (ACC)	<u> PHILADEL</u> F	PHIA I I I I		J LPA L	19103	
2. FEC IDENTIFICATION	NUMBER 🔻	CITY 🛕		STATE	ZIP CODE ▲ STATE ▼ DISTRIC	
C00333740		3. IS THIS REPORT	NEW (N) OF	AMENE (A)	PA [1]	
4. TYPE OF REPORT (a) Quarterly Reports:	(Choose One)	(b) 12-Day PRE	E-Election Report for the	ne: General (1	2G) Runoff (12R)	
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)						
		Ш	Convention (12C)	Special (1		
October 15 Qu	October 15 Quarterly Report (Q3)		11 0	2006	in the PA State of	
January 31 Ye	ar-End Report (YE)	(c) 30-Day POS	ST-Election Report for	the:		
			General (30G)	Runoff (30	OR) Special (30S	
Termination R	eport (TER)	Election on			in the State of	
5. Covering Period	0 4 0 1	2006	through	0 4 2 6	2006	
I certify that I have examined	this Report and to the	best of my knowledge	e and belief it is true, c	orrect and complete.		
Type or Print Name of Treasu	urer Richar	d J Maccarone				
Signature of Treasurer Ele	ectronically Filed by	Richard J Maccar	one	Date 0 7	13 2006	
NOTE : Submission of false,	erroneous, or incomp	lete information may s	subject the person sign	ning this Report to the	penalties of 2 U.S.C 437g.	
Office Use Only					FEC FORM 3 (Revised 02/2003)	